IN THE UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF WISCONSIN

TROY WEST,

Plaintiff,

ORDER

v.

Case No. 25-cv-486-jdp

GUNDERSON HEALTH SYSTEM (GUNDERSEN LUTHERAN MEDICAL CENTER),

Defendants.

TROY WEST,

Plaintiff,

ORDER

v.

Case No. 25-cv-487-jdp

LA CROSSE COUNTY STATE'S ATTORNEY OFFICE, et al.

Defendants.

Plaintiff Troy West has filed two proposed complaints. Plaintiff seeks to commence these lawsuits without prepayment of the filing fees pursuant to 28 U.S.C. § 1915.

From plaintiff's affidavits of indigency, I cannot determine whether plaintiff qualifies for indigent status. The affidavits indicate that plaintiff is unemployed, has no income and is not married, however, plaintiff does not include information regarding paying for basic living expenses, such as food, clothing and shelter. Without this information, I am unable to determine whether plaintiff qualifies for indigent status. Therefore, I will provide plaintiff with the opportunity to supplement the requests for leave to proceed without paying the filing fees by completing the enclosed affidavit of indigency. When completing the affidavit, plaintiff

should take care to show how basic necessities are paid, and include plaintiff's actual gross monthly income from all sources for the last 12 months.

ORDER

IT IS ORDERED that plaintiff Troy West, may have until July 7, 2025, to amend and return the affidavit of indigency, taking particular care to show how basic necessities are paid, and include actual gross monthly income from all sources for the last 12 months. If plaintiff fails to provide this requested financial information, then the court will deny the request for leave to proceed without prepayment of the filing fees for failure to show indigency.

Entered this 11th day of June, 2025.

BY THE COURT:

/s/

ANDREW R. WISEMAN
United States Magistrate Judge

UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF WISCONSIN

TRC	DY WEST ,							
V.	Plaintiff,		ORDER					
GUI (GU	NDERSON HEALTH SYSTEM NDERSEN LUTHERAN MEDICAL ITER),		Case No.	25-cv-486-jdp				
LA (CROSSE COUNTY STATE'S FORNEY OFFICE, et al.		Case No.	25-cv-487-jdp				
	Defendants.							
	NON-PRISONER REQUEST TO I WITHOUT PREPAYI			CT COURT				
	rer the following questions to the best of you If you do not tell the truth, the court may of	•	lawsuit.					
I.	Personal Information							
1)	Are you employed?	□Yes	□ No					
2)	Are you married? If "Yes," is your spouse employed?	□ Yes □ Yes	□ No □ No					
3)	Do you have any dependents that you are responsible for supporting? ☐ Yes ☐ No If "Yes," list them below:							
Name or initials (for <u>Relationship to Y</u> minor children only)		<u>ou</u> <u> </u>	<u>Age</u>	Amount of Support Provided per Month				
				\$				
				\$				
				\$				

II.	<u>Income</u> - If you are married, your answers <i>must include your spouse's income</i> . (When calculating income, include any wages, salary, rent, child support, public assistance, unemployment compensation, disability payments, life insurance payment pensions, annuities, workers' compensation, stock dividends and interest, gifts and inheritance, or other money you receive from any source.)				
1)	State your total <i>monthly</i> wages or salary?	\$			
2)	Provide the name and address of your emp	ployer(s):			
3)	State your spouse's total <i>monthly</i> wages or	salary? \$			
	the amount of money you have received from as the sources listed above. Please attach an	m any other source in the last twelve months, additional sheet if necessary.			
Source of income		Amount			
		\$			
		<u> </u>			
III.	Expenses - If you are married or have dependents, <i>your expenses should also include your household's expenses</i> . (When calculating household expenses, you may include groceries, clothing, medical costs, utilities that are not included in your rental payments, transportation, and insurance.)				
1)	Identify the following amounts that you pay per month:				
	□ Rent or □ Mortgage	\$			
	Car payment(s)	\$			
	Alimony or court-ordered child support	\$			
	Credit card payment(s)	\$			

Do you ☐ Yes	o you have any other <i>monthly</i> expenses that you have not already listed? Yes □ No					
If "Yes	," list them below:					
Expens	<u>e</u>			<u>Amount</u>		
		\$				
		\$				
		\$				
What a	re your total monthly expenses?	\$				
Proper	<u>ty</u> - If you are married, your answe	ers must <i>i</i>	nclude your	r spouse's property.		
Do you	Do you own a car? □ Yes □ No			If "Yes," list car(s) below:		
Make a	nd Model		<u>Year</u>	Approximate Current Value		
				\$		
				\$		
Do you	own your home(s)? □ Yes	□ No				
If "Yes	," state the approximate value(s).	\$				
What is mortga	s the amount of equity (assessed vage balance) in the home(s)? \$	lue of res	idence minu	us outstanding		
Do you □ Yes	Do you have any cash or checking, savings, or other similar accounts? □ Yes □ No					
If "Ves						
11 1 CS	"," state the total of such sums.	\$				

Date			Signatur	e - Signed Und	er Penalty of Pe	rjury
compla	e that I am ui	, decay the same the	fee and that I an	n entitled to the	relief sought in t	he
		consider when revi			()	
V.	Other Circ	umstances - Descr	ibe any other fir	nancial circumst	rance(s) that you	would like
						_
	If "Yes," de	escribe the property	and the approxi	imate value(s).		
	□ Yes	□ No				
4)		n any other property of value, such as real estate, stocks, bonds, trusts, or retirement accounts (e.g., IRA, 401 k), artwork or jewelry?				